



Emergency Transport Scheme (ETS) in Gombe State, Nigeria (Part 4 – Final Monitoring and Evaluation)

Project Location:	Billiri, Dukku, Kaltungo and Nafada LGAs, Gombe State, Nigeria
Project Start Date:	2010
Project Duration:	1 Year

Introduction: In Gombe State, Northern Nigeria, a two-year Maternal and Neonatal Health (MNH) Learning Project has been in place since late 2009. This is a two year project that will be concluded in 2011. Recognising that only a small percentage (17%) of births occurs at health facilities across the State, while the large majority of women still give birth at home, the project aims to test different MNH practices at the household level, in order to identify successful models that can be replicated and scaled up.

Key interventions of the project include the training of Traditional Birth Attendants (TBAs) and Federation of Muslim Women's Association of Nigeria (FOMWAN) volunteers at the community level, and the distribution of Clean Delivery Kits through the Patent and Proprietary Medicine Vendors across the State, which can be purchased by families and TBAs. To provide specialist advice to these trained community volunteers in case of a maternal emergency, a call centre staffed with nurses and midwives was established. Finally, emergency transport available at the community level is to be improved, so that women experiencing obstetric emergencies can be transferred to the health facilities across the state.

To improve the availability of appropriate and low-cost emergency transport is an important part of the strategy to improve the Call Centre's ability to reduce the delay between the onset of an obstetric emergency and the patient receiving appropriate care. Similarly, appropriate and low-cost transport needs to be in place if interventions among TBAs and FOMWAN volunteers are to be successful, since these cannot adequately address emergency situations.

The project is led by Society for Family Health (SFH). Transaid is working with the National Union of Road Transport Workers (NURTW) to implement an Emergency Transport Scheme (ETS) in Gombe State, using its previous experience from the implementation of a similar scheme in the Northern Nigerian States of Katsina, Yobe and Zamfara. In order to evaluate the relationship of the ETS with the different project models, the ETS was implemented by Transaid in four pilot Local Government Authorities (LGAs) in Gombe.

Methodology: The following key activities were undertaken in order to achieve the objectives of the project;

1. Execution of Formative Research, to inform the implementation of the ETS;
2. Selection of 4 Pilot LGAs in Gombe State;
3. Implementation of the ETS in the 4 Pilot LGAs:

- a. Selection of 4 NURTW officials and delivery of 5-day training of trainers (ToT) to produce 4 Master trainers;
 - b. Selection and training of volunteer drivers conducted by the Master Trainers (ETS1).
 - c. Driver mobilisation and awareness raising in motor parks across the 4 pilot LGAs conducted by the Master Trainers with the support of the consultants (ETS2).
4. Support to the planning of the ETS expansion to the remaining 7 LGAs in Gombe State, selection of NURTW officials to attend ToT and one-day stakeholder's sensitisation workshop;
 5. Three rounds of supervisory visits (Monitoring and Evaluation) conducted by the consultants in different stages of the project: August - September 2010, December 2010 and between January and June 2011;
 6. Final project activities to ensure a smooth handover of the ETS coordination to SFH.

From these activities the following key outputs were delivered:

1. Formative Research completed and results delivered to SFH;
2. In the 4 Pilot LGAs:
 - a. 4 NURTW officials trained as Master Trainers.
 - b. 160 drivers selected and trained as ETS volunteers.
 - c. Approximately 400 drivers sensitised during motor park awareness raising activities.
3. Remaining 7 LGAs in Gombe State (expansion LGAs):
 - a. Expansion plan and budget completed.
 - b. 7 Master Trainers selected to attend ToT.
4. Between March 2010 and June 2011 a total of 1735 emergency cases had been transported by ETS drivers and recorded by the LGA Focal Persons in their logbooks in the 4 pilot LGAs;
5. In-depth interviews with ETS volunteers, NURTW officials, mothers who have benefitted from the ETS program, TBAs, FOMWAN volunteers and other relevant stakeholders were carried out during M&E visits;

Outcomes: In July 2011 a comprehensive end-line monitoring and evaluation activity was completed providing the following findings:

1. The ETS was successfully implemented in all LGAs in Gombe State, with the exception of Gombe LGA, where a similar scheme was already in place. There is no significant difference between the outcomes of the ETS in pilot and expansion LGAs.
2. The ETS drivers and NURTW management at both state and LGA level are still very enthusiastic in ensuring continued success of the scheme and this will be a very important factor in the long run success of the scheme.
3. The priority loading system is serving as a strong motivation to ETS drivers in most LGAs, although it is not always linked to good data collection, as expected since the beginning of the project.

4. The ETS drivers and LGA Focal Persons are receiving adequate cooperation from traditional rulers, community members, husbands of pregnant women and road traffic regulatory agencies.
5. Communities are well aware of the scheme and are willing to use it, although in some communities there is the mistaken belief that drivers are not volunteers and are receiving a salary from the Government or from SFH.
6. There were few reports about ETS drivers charging money for transporting pregnant women to and from health facilities (on top of the standard contribution towards fuel). These isolated cases were usually linked to the problem mentioned in no. 5 above, which has contributed to the demoralisation of some of the volunteers.
7. There is a strong collaboration between ETS drivers and other project volunteers, particularly TBAs and FOMWAN volunteers, in all LGAs.
8. Some health facilities, particularly PHC Clinics and Maternity Clinics, are using the ETS volunteer drivers to refer complicated cases to a higher level of care.
9. Results from surveys carried out during M&E activities show that 89% of the drivers surveyed are well aware of the ETS and 45% had participated in ETS 2 or Peer Session activities. Moreover, results from surveys conducted in communities across the state show that there was an average 68% reduction in emergency transport cost for pregnant women after the implementation of the scheme.

4. The Call Centre ETS phone numbers database should be updated at least every 2 months.
5. The ETS data should be included in the SFH data collection and data analysis systems;
6. Finally, awareness raising activities at the community level should emphasise the volunteer aspect of the scheme, to avoid the common perception in many communities that the drivers are employees of the government in this project.

Tools Utilised: ETS Recording Tools (logbooks kept by NURTW officials and ETS drivers), Interview Guidelines.

Partners: The project is being implemented by the Society for Family Health, an indigenous Nigerian NGO, with funding from the Bill and Melinda Gates Foundation.

About Transaid:

Transaid is an international UK development charity that aims to reduce poverty and improve livelihoods across Africa and the developing world through creating better transport. Transaid was founded by Save the Children and the Chartered Institute of Logistics and Transport. Our Patron is HRH The Princess Royal. Transaid specializes in the following:

- Building the capacity of public health authorities to provide effective, safe and cost efficient transport management systems to promote equitable access to primary health care services.
- Developing and improving logistics and supply chain systems to enhance the delivery of medicines, equipment and relief services to vulnerable communities.
- Promoting effective partnerships to support and enhance community participation in developing sustainable transport solutions in rural areas.
- Developing and delivering transport and logistics training and qualifications for public and private sector operators.

Transaid has the capacity and reach to lead projects throughout the developing world, but is equally capable of providing niche technical assistance to large scale health systems strengthening projects. Transaid maintains strong relationships with a number of leading international organizations including donor agencies such as DfID, DANIDA and USAID, and implementing organizations such as Health Partners International, Options Consulting, John Snow Inc. and Management Sciences for Health.

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Journey Type	Average Distance Travelled (KM)
Driver's Starting Location to Patient Collection Point	3.31
Patient Collection Point to Health Facility	15.86
Longest Single Journey	71.1

Conclusion: Almost two years since the project was launched the ETS has delivered very positive results. The number of emergency cases referred in the 4 pilot LGAs, 1735, is a fantastic achievement. As is the data collected regarding the reduction in the cost of emergency transport (68%) and the data regarding the distances travelled by the ETS driver.

Interventions such as this, which utilise community or private sector transport resources, highlight the opportunities which exist for supplementing traditional government managed ambulance services.

In this project, ongoing ownership of the ETS project by the NURTW is paramount for its success; emphasis should continue to be placed on ownership of ETS by the NURTW and SFH should make sure that the Union is included in any public event organised by the project, in order to show appreciation for the NURTW efforts.

1. ETS stickers and t-shirts should continue to be distributed as a means to motivate the volunteer drivers.
2. A coordination allowance should also be given to the State Secretary of the Union to allow him to travel and collect M&E data when necessary;
3. The ETS component and the efforts of the NURTW should be mentioned during project advocacy activities to ministries and other agencies relevant to the ETS, such as the Ministry of Health, the Ministry for Local Government and the Federal Road Safety Commission, in order to follow up with the sensitisation activities carried out during the project implementation.